State of Hawaii Department of Health

Solid & Hazardous Waste Branch

Underground Storage Tank

919 Ala Moana Blvd., Ste. 212, Honolulu, HI 96814   Ph: 808-586-4226

Initial UST Operator Designation Form

Hawaii UST Regulation HAR 11-281-46 requires that UST owners and operators submit written notice identifying the Class A and Class B operator for each UST or tank system, in use or temporarily out of use, within 120 days of promulgation of the rules.   At least one *Class A and B operator must be trained and certified by* **DECEMBER 9, 2013**. This form may be used to fulfill this requirement.

Owners and operators shall maintain current copies of all operator training certifications and designations for Class A, B and C at the onsite where at the facility assigned on the designation form. These records will be made available for inspection upon request by the department.

Please submit the following information to c/o Roxanne Kwan, 919 Ala Moana Blvd., Ste. 212, Honolulu, HI 96814. For other questions, please contact Thu Perry, Public Participation Coordinator, at thu.perry@doh.hawaii.gov or (808) 586-4226.

Facility Information
Facility Name   DOH Facility No. 9-
Facility Address
City   State   Zip Code
Facility Phone Number
Name of Person Completing Form   (PRINT LEGIBLY)   Signature of Person Completing Form   Date Form Completed and Signed

Class A Operator Designation

Name	Title
Received training from	Date of Certification
	Date of expiration
Phone Number	
Name	Title
Received training from	Date of Certification
	Date of expiration
Phone Number	

Class B Operator Designation

Name	Title
Received training from	Date of Certification
	Date of expiration
Phone Number	
Name	Title
Received training from	Date of Certification
	Date of expiration
Phone Number	

Class C Operator Designations

Name	Title
Received training from	Date of Certification
	Date of expiration
Phone Number	
Name	Title
Received training from	Date of Certification
	Date of expiration
Phone Number	